



Commonwealth
of Massachusetts

Center for Health
Information and Analysis

All Payer Claims Database Data Volume Reports

2008 - 2012

March 2013

The Commonwealth of Massachusetts established an All Payer Claims Database (APCD) in 2010 as one of the largest data collection efforts undertaken by the state. Regulation 114.5 CMR 21.00, Health Care Payer Claims Data Submissions, requires health insurance payers to submit medical, pharmacy, and dental claims, as well as information about member eligibility, benefit design, and providers to the Center for Health Information and Analysis (CHIA) for Massachusetts residents. The goals of the APCD are to provide administrative simplification to payers and to provide access to timely, accurate, and relevant data for improving quality, mitigating costs, and promoting transparency in the health care delivery system.

The charts below depict the number of records submitted to the Center as of December 2012 by health insurance payers. These Data Volume Reports are a concise way of presenting the amount of APCD data collected by year and file type.

Please feel free to submit any questions related to the reports to the Center's APCD mailbox: CHIA-APCD@state.ma.us.

Thank you for your interest in the All Payer Claims Database.

Commonwealth of Massachusetts-Center for Health Information and Analysis (CHIA)
APCD Data Volume Reports 2008-2012 (based on data received by 12/19/2012)

Aetna Life Insurance Company - Strategic Resource Company														
File Type*	Submission Year	January	February	March	April	May	June	July	August	September	October	November	December	Total
PR	2010	0	0	0	0	0	0	0	0	0	0	0	334	334
PR	2011	0	0	323	0	323	329	0	0	334	0	0	334	1643
PR	2012	0	0	257	0	0	236	0	0	217				710
ME	2009	0	0	0	0	0	0	0	0	0	0	0	124,448	124,448
ME	2010	0	0	0	0	0	0	0	0	0	0	0	74,874	74,874
ME	2011	71,766	70,575	68,282	67,884	67,437	67,118	66,096	64,248	64,085	65,386	63,686	61,692	798,255
ME	2012	61,544	59,996	58,878	49,300	49,700	57,712	56,461	46,175	45,662	45,767	45,268		576,463
PV	2011	28,617	28,617	28,617	28,617	28,617	28,603	28,675	28,670	28,618	28,618	28,874	29,109	344,252
PV	2012	29,324	29,542	29,786	30,004	30,178	30,374	30,598	30,931	31,091	31,277	31,531		334,636
MC	2008	710	377	315	326	756	640	903	734	576	659	553	801	7350
MC	2009	779	530	629	604	396	600	471	428	422	430	474	745	6508
MC	2010	558	614	725	726	526	680	513	527	522	491	427	564	6873
MC	2011	510	451	656	516	2,285	2,086	1,853	2,251	1,829	341	1,865	1,618	16,261
MC	2012	2,045	2,150	2,372	1,819	1,904	1,677	2,107	4,054	1,886	2,058	0		22,072
PC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2012	0	0	0	0	0	0	0	0	0				0
DC	2008	54	18	52	179	102	188	191	154	202	162	180	168	1,650
DC	2009	113	57	85	137	104	150	179	134	192	163	97	161	1,572
DC	2010	139	129	203	112	124	147	104	188	101	132	132	142	1,653
DC	2011	96	75	139	89	373	303	310	207	329	311	286	283	2,801
DC	2012	291	317	230	442	406	311	420	357	150	300	338		3,562

***Key:** PR=Product Records; ME=Member Eligibility Records; PV=Provider Records; MC=Medical Claim Lines; PC=Pharmacy Claim Lines; and DC=Dental Claim Lines.

The Volume Report presents the APCD inventory as of December 2012 and reflects the related compliance requirements:

- Medical, pharmacy, and dental submissions are required monthly beginning January 2008.
- Provider submissions are required monthly beginning January 2011. The May 2011 submission contains historical records from 2008 through May 2011.
- Product submissions are required quarterly beginning December 2010. The May 2011 submission contains historical records from 2008 through 2010 plus 2011, quarter one.
- Member eligibility submissions are required monthly beginning in January 2011. Prior to 2011, payers were required to submit two eligibility files: a December 2009 eligibility submission covering calendar years 2008 and 2009, and a December 2010 eligibility submission covering calendar years 2009 and 2010. Eligibility files contain data for twenty-four months of member eligibility.
- The APCD liaisons monitor and enforce compliance rules and authorize exceptions. Some carriers have incomplete data due to: exemptions from filing, limited claim or member base, phasing into APCD and are currently in testing or ramping up their production data filings, are in the process of updating specific submissions, and /or non-compliance.

These numbers represent the number of records submitted, not actual counts of members, providers, products or claims.









